## BEST AVAILABLE COPY

Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			18				1	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			(8 minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			3 minus 3 =		* /			X42=		OR	X84=	
MU	LTIPLE DEPENI	RESENT					+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2								2 <del>7</del> 20.00	, ,	TOTAL	74000	
CLAIMS AS AMENDED - PART II								TOTAL 370.00 OR			OTHER THAN	
	* * * *	(Column 1) CLAIMS	(Column 2) (Column 2) HIGHEST			(Column 3)	<u> </u>	SMALL ENTITY				
AMENDMENT A	****	REMAINING AFTER AMENDMENT	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*21/	Minus	**	20	= /		X\$ 9=	9	OR	X\$18=	
AME	Independent	* 4 NTATION OF M	Minus	***	3	= /	┇	X42=	42	OR	X84=	
	TINOT PRESE	NTATION OF W	JLIIPLE DEP	ENDEN	CLAIIVI		]	+140=	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	OR	+280=	
							ı	TOTAL ADDIT. FEB	i7/	OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)		ADDII. I EEQ			ADDI1.1 LL1	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	╛╏	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	<del>- 01 414</del>	]=	4	X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	JUIPLE DEP	ENDEN	CLAIM	<u>. L.</u>	┛┃	+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3		ADDII. FEE I			ADDII. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	() (#)	NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	IJĬ	X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	T CL AIM	=-	4	X42=	·	OR	X84=	
<u>L</u>	I INOT PRESE	INTATION OF M	OLITPLE DEP	CINDEN	CLAIM	<u> </u>	┙╽	+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OB	TOTAL		
	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											